## Mississip Michael Callahan Southern District

Mississippi Public Service Commission

Nielsen Cochran Central District Bo Robinson Northern District



## NO CALL Subscriber Registration Form

Please fill out the form in its entirety. The form will not be processed if all required fields are not completed. Required fields are marked with an asterisk (\*). Only residential phone numbers can be registered.

Prefix:	Dr.,	Miss,	Mr.,	Mrs.	, Ms.	(Circle one	э)
*First Name:							
*Last Name:				<del></del>			
Suffix	1	H HH	IV	Jr	Sr	(Circle one	э)
*Address:							
*City:							State: <u>MS</u>
*Zip Code:							
*County:							
*Phone Number:							
E-mail:							
If you have other re like to add to the No							hat you would

The information obtained in this registration is not open to public inspection or disclosure as defined in the Commission's Order. The Mississippi Public Service Commission will take all necessary steps to protect the confidentiality of the information in its database.

Mail completed form to:

Mississippi Public Service Commission Mississippi No Call Program P.O. Box 1174 Jackson, MS 39215-1174

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